



## ***Growing Healthy Kids Columbus***

**VISION:** *Columbus is a community in which all children live in a smoke-free environment, have daily opportunities for active play and access to nutritious foods that lead to children entering kindergarten ready to live, learn and play at their best.*

### **Minutes**

February 27, 2018 10:00am - 11:30am Columbus Public Health, 119C

### **Attendance**

<b>Organization</b>	<b>Member</b>
Action for Children	Don Ntontolo
CCS	Carolyn Bernard
CCS	Lisa German
Children's Hunger Alliance (CHA)	Michelle Hoffman
CPH	Deani Deskins
CPH	Bob Holomuzki
CPH	Emily Fisher
CPH	Michael Kieffer
CPH – CDC PHAP, Chronic Disease Prevention	Lyana Delgado
CPH – CDC PHAP, Chronic Disease Prevention	Elise Fester
CPH – Creating Healthy Communities	Dana Dorsey
CPH – Franklin County WIC	Dawn Sweet
CPH – Growing Healthy Kids Columbus	Ali Segna
CPH – Healthy Children Healthy Weights	Hannah Bills
CPH – Office of Minority Health	Jesus Ovalle
Franklin County Public Health (FCPH)	Kristin Peters
Franklin Park Conservatory (FPC)	Christie Nohle
Mount Carmel Health (MCHS)	Chris Evans
Moms2B	Lydia Burney

#### **STEERING COMMITTEE MEMBERS:**

Carolyn Bernard, Columbus City Schools  
Megan Gorby, Nationwide Children's Hospital  
Mark Haynes, Children's Hunger Alliance  
Ali Segna, Columbus Public Health  
Bobbi Shannon, YMCA of Central Ohio

Carol Smathers, Ohio State University Extension  
Dawn Sweet, Franklin County WIC  
Hannah Bills, Columbus Public Health  
Rebecca Wade-Mdivanian, Ohio State University Life Sports  
Maria Villareal, CDCFC Head Start  
Matthew Yannie, United Way of Central Ohio

Nationwide Children's Hospital – Center for Healthy Weight and Nutrition	Megan Rose
OSU CCC – The James	Ekram A. Ali
OSU – Extension	Carol Smathers
OSU – Extension Franklin County	Jenny Lobb
OSU – Life Sports	Stephen Moore
YMCA	Stephanie Cedenio
YMCA – Head Start	Jess Lambie
YMCA – Hilltop	Felicia Cropper
YMCA – Hilltop	Nadine Rinehart

**10:00am – 10:30am Member Introductions and Program Updates**

All

- Highlights
- New resources/education
- Policy, system and/or environmental changes
- Challenges or barriers

<b>Partner/Organization</b>	<b>Program Updates</b>
Ali/CPH	ChangeLab Solutions will be coming to our next steering committee meeting to help direct goals and plans for 2018. HCHW piloted two Ohio Approved Afterschool trainings at the Ohio Afterschool Network conference, one on Healthy Gatherings for afterschool and early care programs and one on Physical Activity for afterschool.
Michelle/CHA	Renewals for OHP, TA visits rolling out next week. Biggest fundraising event, Menu of Hope (700+ folks represented). Job opening for RDs interested in Public Health for Cleveland area.
Dana/CHC/CPH	Next month we will have updates on community groups.
Hannah/HCHW/CPH	Hosting OHP online train the trainer this Friday.
Bob/Strategic Nursing Team	Finished Flu vaccines in schools, back at GHKC.
Carol/OSU Ext.	Serve as model for other communities, nominated for Culture of Health award, international Farm to Cafeteria conference being planned. Currently working on Franklin County educators to be trained for OHP.
Lydia/Moms2B	Sites going well, hiring Patient Navigator (Social Workers), working on a website curriculum for Moms2B.
Elise/CPH	SRTS finished data collection, responses from 30/70 schools, which include 300 classrooms (pre-K and K included). 2 new walking school bus programs.
Lisa/CCS ECE	Enrollment for pre-K starts in April
Carolyn/CCS	Imagination Playground, GHKC parent presentation in March for parent engagement.
Stephan/ Life Sports	Looking for future partnerships
Kristin/FCPH	Mapping out menus for schools for next year. 1 childcare center on

	board.
Megan/NCH	We are hosting an event for kids tomorrow evening, will be using Water First for Thirst jug from Healthy Gatherings Challenge.
Jess/YMCA	3 <sup>rd</sup> I am Moving I am Learning training. Need intentional, structured movement.
Stephanie/YMCA	Expanding access for food for kids on the weekends, kids ages 1-18 can get a free lunch.
Jenny/OSU	Recruiting for pilot program for the summer (nutrition and gardening for 3 <sup>rd</sup> graders), weeknight evenings.
Dawn/WIC	Online pilot looking to come out in April, outreach on hold. Dietician position has come available and will soon be posted.
Emily/CPH	Health literacy events to be coordinated in October. Coalition meets 2 <sup>nd</sup> Wednesday of every month.
Jesus/CPH	Working on Minority Health month in April, every weekend in April will have an event planned. Cultural Humility presentations for the community.
Christie/Franklin Park Conservatory	New session for nature school, morning session and afternoon session for 3-5 yr. Planning for at risk teens to teach how to urban farm in the summer. 7 <sup>th</sup> month at Heavenly Kids Day Care center, partner with Mid-Ohio Food Bank. Partnering with CCS and CPH, grow labs (plants from seeds).
Nadine/YMCA Hilltop	National Kids Day, April 21 <sup>st</sup> anyone can volunteer or table the event. It will be occurring in a variety of neighborhoods throughout Columbus through the varying YMCAs.

## 10:30am – 10:45am Breaking News

Lyana Delgado

### *Nutrition Program and Obesity Drop Among US Toddlers*

- Children enrolled (2-4yr) Special Supplemental Nutrition Program for WIC
- 2010 to 2014, the overall prevalence of severe obesity decreased significantly from 2.12% to 1.96%, the largest relative decrease was in 2 year olds and Asian/Pacific Islander, Hispanic, and American Indian/Alaska Native children.
- [https://www.medscape.com/viewarticle/891029?nlid=119977\\_4503&src=wnl\\_dne\\_180109\\_mscpedit&uac=188015FG&impID=1529754&faf=1#vp\\_2](https://www.medscape.com/viewarticle/891029?nlid=119977_4503&src=wnl_dne_180109_mscpedit&uac=188015FG&impID=1529754&faf=1#vp_2)

### *Sugary Drink Taxes Gain Momentum throughout the U.S*

- In 2014, we finally saw progress when voters in Berkeley, California, became the first city in the country to pass a tax on sugary drinks.
- Philadelphia became the second US city to pass a sugary drink tax
- “The tax created a two-fold opportunity,” she says. “The tax itself would improve health by reducing consumption of sugary drinks, and by strategically investing the revenue raised it would improve access to healthy food and reduce disparities in education.” (Seattle)
- September 2017 POLITICO-Harvard poll found that 57 percent of respondents supported taxing soda and other sugary drinks to raise money for preschool and children’s health programs and to help address the problem of weight-related diseases.
- [https://www.voicesactioncenter.org/sugary\\_drink\\_taxes\\_gain\\_momentum\\_throughout\\_the\\_u\\_s?utm\\_campaign=it\\_jan\\_4\\_18&utm\\_medium=email&utm\\_source=voicesactioncenter](https://www.voicesactioncenter.org/sugary_drink_taxes_gain_momentum_throughout_the_u_s?utm_campaign=it_jan_4_18&utm_medium=email&utm_source=voicesactioncenter)

### *These Food Products Are Considered “Healthier” For Kids By The Food Industry*

- Children's Food and Beverage Advertising Initiative
- "Low-calorie" beverages are exempt, which leaves the Kraft Heinz Company free to advertise the 30-calorie Capri Sun Roarin' Waters, even though it has added sugars and artificial sweeteners, and despite its "tropical" flavor, no fruit.
- McDonald's can advertise Happy Meals because the Chicken McNuggets, fries, and burgers are served alongside apple slices and milk.
- The industry's "healthy" criteria require that products limit levels of some nutrients (like sodium) and include other nutritious ones (such as iron).
- [https://www.buzzfeed.com/stephaniemlee/food-industry-ad-criteria?utm\\_term=.xskYoy8eo#.ce9wo60xo](https://www.buzzfeed.com/stephaniemlee/food-industry-ad-criteria?utm_term=.xskYoy8eo#.ce9wo60xo)

#### *McDonald's Announces Next Phase of Happy Meal Improvements*

- McDonald's has announced a welcome next step toward improving the nutritional profile of its Happy Meals. For American children, that means that by the summer all Happy Meals will have no more than 600 calories, with less saturated fat, sodium, and added sugars.
- McDonald's, Burger King, Wendy's, Applebee's, IHOP, Dairy Queen, and Jack In the Box have taken sodas off the kids menu. Still 75% of top 50 chains still do.

#### *In Sweeping War on Obesity, Chile Slays Tony the Tiger*

- New regulations, which corporate interests delayed for almost a decade, require explicit labeling and limit the marketing of sugary foods to children.
- Marketing restrictions, mandatory packaging redesigns and labeling rules aimed at transforming the eating habits of 18 million people.
- Global obesity epidemic that researchers say contributes to four million premature deaths a year.
- Law prohibits the sale of junk food like ice cream, chocolate and potato chips in Chilean schools and proscribes such products from being advertised during television programs or on websites aimed at young audiences.
- Beginning next year, such ads will be scrubbed entirely from TV, radio and movie theaters between 6 a.m. and 10 p.m. In an effort to encourage breast-feeding, a ban on marketing infant formula kicks in this spring.
- Beverages high in sugar include an 18 percent tax
- Over half of 6-year-old children overweight or obese.
- Senator Girardi, 56, publicly assailed big food companies as "21st century pedophiles" "Sugar kills more people than terrorism and car accidents combined," he said in an interview as he shook a box of Trix cereal for effect. "It's the poison of our time."
- A supermarket shelf in Santiago. Each of the black nutrition labels indicates a product is high in one of four categories: salt, sugar, calories and fat
- Cereal bars, yogurts and juice boxes, products long advertised as "healthy," "natural" or "fortified with vitamins and minerals," now carry one or more of the black warning labels.
- Food companies have been voluntarily modifying their products to avoid the dreaded black logos.

#### *Discussion*

- *How does the US fair in this arena? Are policies and regulations like those in Chile possible in the US? Next steps locally? If so, how? If not, why not/what can we do instead of?*
- Dawn Sweet- WIC – Is there a campaign to educate parents towards buying the foods? Are we educating the parents about why we are changing the labels? – Right now they looking to prevent these products from being bought. It is needed but not currently being worked on.

- Stephen - OSU Lifesports - What is the relationship between the school system and these products being bought? – Schools have to follow nutritional guidelines however food producers have reformulated their products to meet these standards therefore are still able to be served. Seen as healthy at school and then can be purchased at home. Reduced sugar options are not available at the stores.
- Chris – MCHS - Smoke free tobacco – movies rated because people are smoking in movies, is there a similar thing towards marketing of unhealthy foods? – 1.8 billion dollars are spent marketing towards children. Sesame Street has taken these steps.
- Michelle – CHA - Nephew is 4 – Reggies Rainbow Adventures (character that dresses for children to promote veggies), funded by the kidney foundation
- OSU – survey of preschool students in SS Columbus, parents still serve the unhealthy stuff with the healthy stuff.
- Obesity rates and family structure.

### **10:45am – 10:50am Activity Break**

All

### **10:50am – 11:20am Beverage Marketing to Young Children**

Lyana Delgado

#### *Setting the Stage*

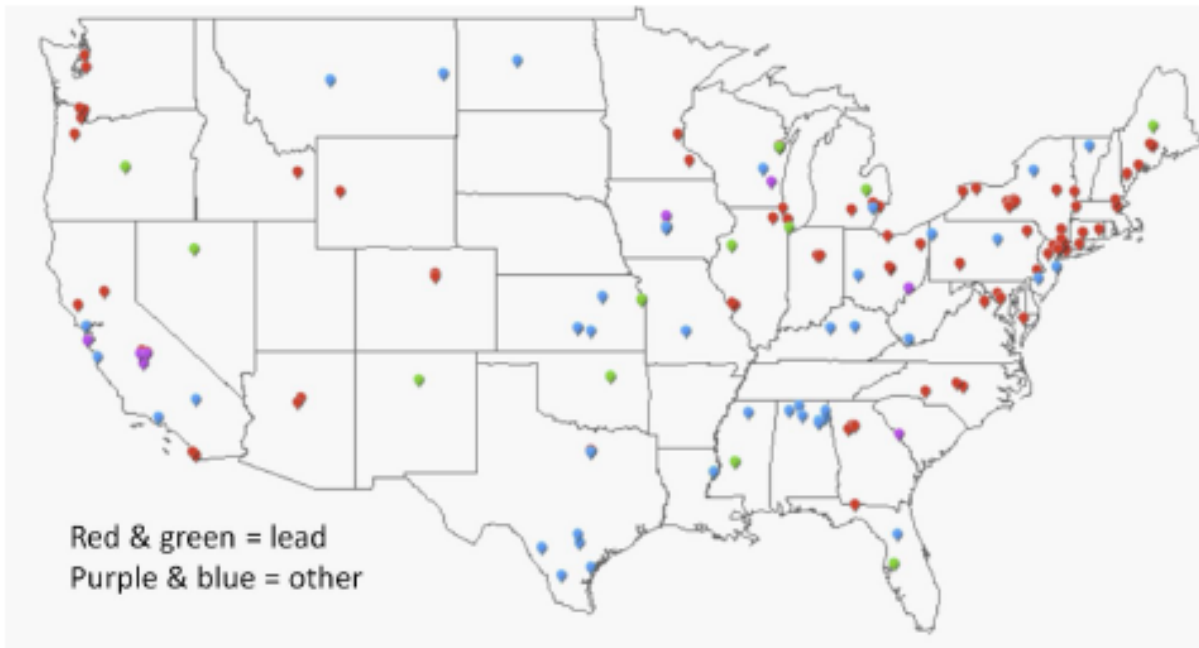
- Human diet begins as a single drink, milk
- Sweetness=innate preference for taste
- 1st sweet beverage = 100% fruit juice
  - 5th largest sugar contributor amongst 6-12mo
  - 2nd largest sugar contributor amongst 12-24mo
- Sugar-Sweetened Beverages (SSB)
  - 1% = 0-6mo
  - 6% = 6-12mo
  - 32% = 12-24mo
- Fruit-flavored drinks are the most commonly consumed SSB
  - 50% = 36-47.9mo
  - Mostly consumed at home
  - Black and Mexican-American kids 6-24mo consume more fruit flavored drinks compared to white kids
  - More prevalent than 100% fruit juice among 36-47.9mo group

#### *Childhood Obesity Intervention Cost-Effectiveness Study*

- Childhood Obesity Intervention Cost-Effectiveness Study
- Cost effectiveness of obesity prevention programs and policies, models created for a 10 year timespan
- measuring dietary intake in <5yr olds is difficult
- 3 CHOICES
  - SSB Excise Tax for every \$1 invested
    - Reduce racial/ethnic, SES disparities
    - Prevent 580,000 childhood obesity cases
    - \$30 in healthcare cost savings
  - Smart Snacks in Schools
    - Prevent 345,000 childhood obesity cases
    - \$5 in healthcare cost savings
  - Nutrition and PA Self-Assessment for Child Care

- Used to change nutrition profile of food in ECE settings
- Save \$1,000/yr at the center for 30 kids
- Prevent 38,000 childhood obesity cases
- Replace 100% fruit juice w/water

*“Tap Water=Disparity Reducer”*



**FIGURE 2-2** Media reports of tap water contamination since January 2015.

SOURCES: As presented by Christina Hecht, June 21, 2017. Copyright © 2017 The Regents of the University of California. Used by permission.

## Water

- 60% 0-6mo exclusively drink water
- Lead is a problem
- Female, Hispanic/Black children unlikely to drink tap, college-educated parents 2x more likely
- Messaging needs to be intentional and tailored → families felt they weren't getting their money's worth if center served water and not juice.
- Water access, promotion, education are key!

## *Beverage Intake Guidelines for Young Children*

- Dietary Guidelines for Americans (DGA)
  - Added sugars= <10% of total energy consumed
- US Diet
  - 47% added sugars come from beverages
  - 39% added sugars come from SSB
- School Policies
  - Nutrition/Beverage Standards
  - Provider and Teacher Support
- Added sugars should be replaced by healthier options not low-calories sweeteners
- 10% is a lenient recommendation
- Very few policies for kids under 5yrs

- Reducing/eliminating unhealthy foods and beverages can help improve buying behavior and higher quality dietary intake by kids
- Nutrition education/PA curriculum for teachers

#### *Recommendations of DGAC*

- Special Supplemental Nutrition Program (WIC)
  - Decline in SSB and 100% fruit juice
- Marketing:
  - \$1.8 billion spent of food marketing to kids
  - limit foods high in added sugars, sodium to all age groups (esp. children and adolescents)
  - black see 2x more tv ads, Latinos 80% food unhealthy ads on tv
- SNAP
  - restriction can lead to less choice and targeting low income communities
- Pediatricians should ask parents how they expose their children to media
  - AAP→ no formalized restrictions working with AHA to develop statement, but recognize certain SSBs (i.e. sports, energy, soft drinks) inappropriate for kids.

#### *Influencing Beverage Consumption through Federal, State, and Local Policies*

- \$101 billion in 2016 on food and nutrition programs
  - SNAP, National School Lunch Programs, WIC, School Breakfast Program, CACFP
  - SNAP is the largest program (44million ppl/month, \$70.8 billion in 2016)
- 1 in 4 Americans use food assistance programs each year
- Leverage breakfast program to expose more kids to healthier options
- WIC→ SSB purchases went down, not compensated by other juices/beverages with non-WIC funds

#### *Licensing Opportunities*

- Getting a Healthy Start → Support breastfeeding, especially among low SES and lack Women, increase Baby-Friendly practices (i.e. hospitals)
- Growing up Strong →
- Spectrum of Opportunity, 47 states promote/provide interventions, curriculums, programs that can support healthy beverages, South Carolina no SSB can be served in ECE settings
- Maintaining Good Nutrition → CDC Drinking water access tool-kit
- ECE settings are a key mechanism for early intervention. Mostly state regulated, differences among states with child care and family child care home regulations. Mostly linked through CACFP standards
- NY- Nutrition education (ECE, Farmers Markets), Educational Campaigns (Pouring on the Pounds)
- Leverage fed nutrition programs to change home environment, they change faster than any other setting

#### *Challenges and Opportunities of Emerging and Innovative Strategies*

- Water First!
  - 2% tax on unhealthy foods in Navajo Nation
  - Family and Kinship influence food/beverage selections
- Children's Menus at Restaurants
  - No SSBs served
- Tax and Warning Labels
  - Revenue and Product Reformulation
  - Tax revenue= reinvested back into the community (i.e. farmer's markets, clean water, community gardens, etc.)
  - Need a local champion

- Children's menus can improve social norms for children's food.

#### *The Role of Industry in Sugar-Sweetened Beverage Consumption*

- Food ads increase children's preference of a product
- Fruit Drinks and Flavored Waters
  - 40% contain nonnutritive sweeteners
- Marketing is misleading
  - Black children exposed to 60% more food ads
- Nutrition Claims
  - 4.3 claims per beverage package
  - Parents viewed SSBs as healthy
  - Nutrition claims to parents provide permission to buy product (Good Source of Vitamin E)
  - Brands seen as healthy
  - Price reductions in SSBs for kids

#### *Partnership with Industry*

- "Speak their language"
- Incentivizes companies
- If a brand is marketed, all products should meet same nutrition standards
- Alliance for a Healthier Generation
  - Partnered with American Beverage Association
    - Phase out full-calorie carbonated soft drinks
    - Reduce portion sizes
    - Reduce portion sizes in schools
    - Bev. Companies/restaurants react to the wants of the consumer
    - Less soda, increased 100% juice consumption
    - Decreased over 90% in beverage Calories and soft drinks/restricted drinks to schools
    - Incentivizes companies to reformulate products

#### *Reflections and Future Opportunities*

- Young children are not customers
- Access and Promotion to Safe Drinking Water
- Leverage Federal Food/Nutrition Assistance Programs
  - SNAP, CACFP
- Growth, Health, and Development messaging
- Identify partners
- Young children are not customers and are completely dependent on what is served or offered to them
- Fed programs:
- Repackage items, nutrition education, standardize regulations
- Important to families
- Partners: industry, community leaders, pediatricians, teachers, families

#### *Next Steps*

- Are these recommendations possible in Columbus?
- How can we elevate our efforts to match any of the recommendations provided?
- Questions/Comments?

#### *Discussion*

- Perception of bottled water and tap water amongst minority groups – Add to target marketing presentation, always look at the source (municipal source = tap water)



- Fluoride in water – decreases decay

*Are these recommendations possible for Columbus?*

*How can we elevate our efforts to match any of the recommendations provided?*

- OHP – working from the bottom up – starting within our own organizations
- Companies are misleading customer choices – unintentionally the consumer buys them – need to educate
- Consumption of soda has decreased, but sugar beverages have increased amongst adolescents. Children's menu that meets standards. Frappuccino's from Starbucks formulated to target towards kids.
- Need to provide culturally competent information as it relates to youth:
  - Need to educate the youth on these types of SSBs, not just soft drinks and energy drinks
  - Smoothie Bars (Lots of added sugars in the smoothies)
  - Starbucks – advertise towards kids with kid sizing (Frappuccino's)
  - Middle school – can't have soda but 3 days a week you can get a smoothie.
- Read the ingredients!
- How to navigate chain restaurants, smoothie bars, etc.
- A lot of the initiatives were to eliminate soda consumption...
- Rethink Your Drink display – the visual kids see is very impactful
- Parenting at Meal Time and Play Time – Ounce of Prevention both geared to educating pediatricians. Are we getting all of the important stakeholders?

*Recommended in going into medical schools?...*

- WIC can even hold an event to educate the providers.

**11:20am – 11:30am What can your organization do/contribute the coalition's objectives** Ali Segna  
We will discuss this more in detail at next month's coalition meeting.

**Next Meeting:** March 27, 2018 10:00am-11:30am Columbus Public Health, 119C.

**Next Steps: What can your organization do/contribute the coalition's objectives?**